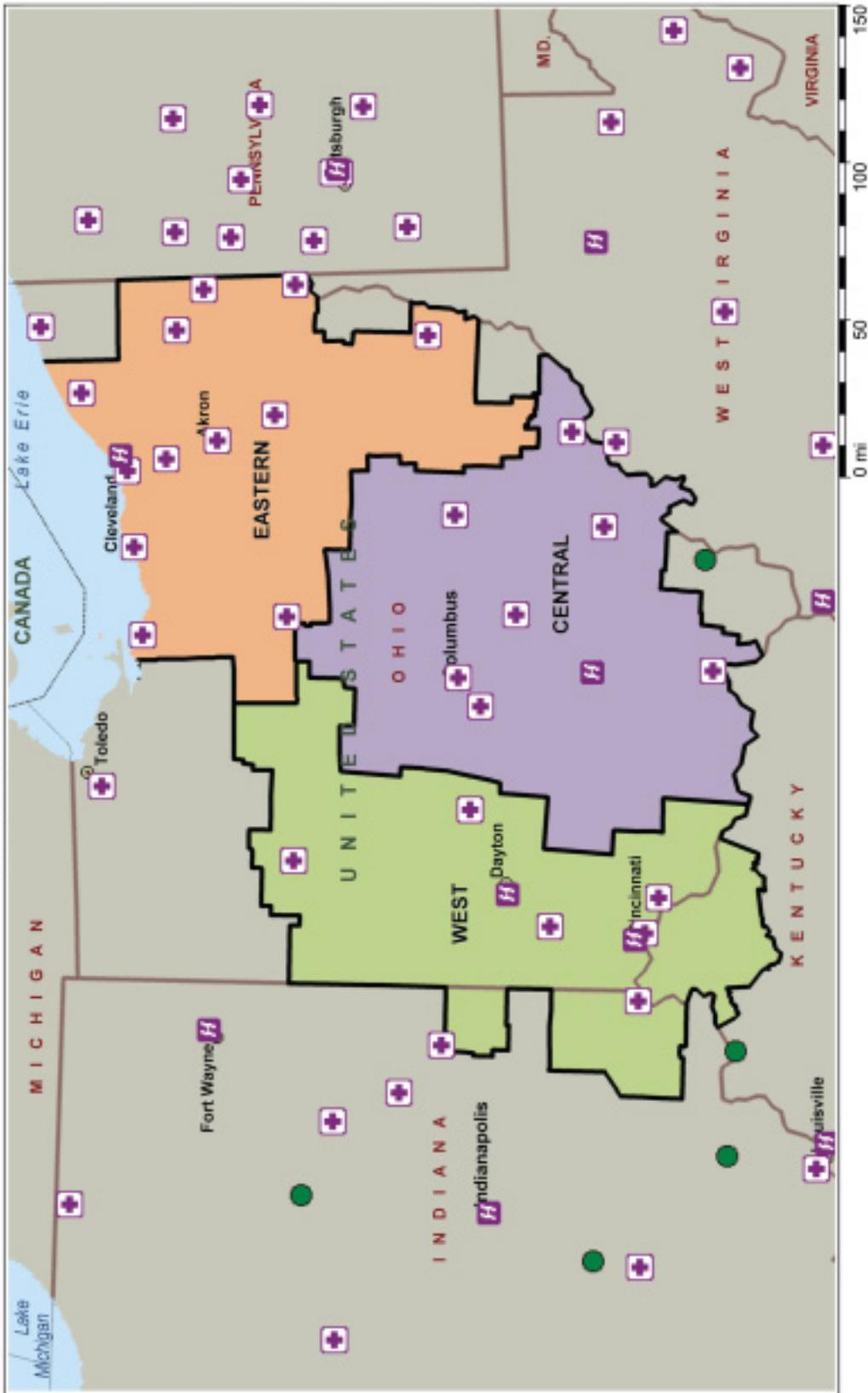


VISN 10



- Pushpins**
- VA Clinic
- VA Hospital
- Planned New CBOC
- Markets**
- CENTRAL
- EASTERN
- WEST

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CARES DECISIONS FOR VISN 10

CARES Commission Recommendation

I Mission Change and Campus Realignment

Brecksville and Wade Park

Divisions of the Cleveland VA Medical Center (VAMC)

- 1 The Commission concurs with the DNCP proposal to relocate current psychiatric, nursing home, domiciliary, and residential services from Brecksville to Wade Park, provided the existing level of services can be maintained.
- 2 The Commission concurs with the DNCP proposal to pursue enhanced use leasing opportunities at Brecksville in exchange for property adjacent to Wade Park.

Secretary's Decision

I Mission Change and Campus Realignment

Brecksville and Wade Park

Divisions of the Cleveland VA Medical Center (VAMC)

VA will consolidate the Brecksville Division to the Wade Park Division of the Cleveland VAMC. This consolidation will be accomplished through an enhanced use lease and major construction project that will modernize and expand the patient care facilities at the Wade Park campus. Once completed, this will allow VA to provide Cleveland area veterans with health care at one newly renovated and comprehensive tertiary medical center.

This consolidation will improve services for Cleveland veterans. New construction and renovation will improve the environment of care by replacing aging patient care buildings at Brecksville with new and renovated facilities at the Wade Park VAMC. It will improve coordination of care by collocating all patient treatment and administrative services at one medical center that can comprehensively handle all of the inpatient care needs of Cleveland area veterans. The consolidation also will improve resource use, redirecting patient care resources from maintenance of aging facilities at Brecksville to patient care at the expanded Wade Park VAMC.

The VISN has submitted a construction project application for this consolidation that includes an improved and project-based life cycle cost analysis. This plan estimates significant resource savings with an anticipated payback period of four years. To ensure effective implementation of this consolidation, VA will develop

a Master Plan for the Brecksville and Wade Park campuses. The Master Plan will ensure that there is no interruption of existing services until construction of the new facility is completed and transfer of patients from the Brecksville campus to the Wade Park campus can be managed effectively.

VA is committed to minimizing any impact on patients, employees, and the community as it manages this transition. To minimize impact on patients, VA will ensure continuity of patient care to the greatest extent possible. For employees, VA will seek to minimize any impact by reassigning staff to other work areas and providing appropriate retraining if necessary. Should any negative impact in employment occur, VA will manage any changes in employment through natural attrition, transfer, early retirement, retraining or other mechanisms. VA will continue to work closely with its stakeholders to ensure that this consolidation is managed effectively.

The consolidation proposal plans for an enhanced use lease agreement for the Brecksville campus. VA will ensure that the terms of the lease will serve to enhance the Department's mission.

While this consolidation is expected to occur over several years, the VISN will complete a Master Plan to guide the transition by September 2004.

CARES Commission Recommendation

II Access to Hospital Care and Inpatient Medicine Services

- 1** The Commission concurs with the DNCP proposal to contract for inpatient care with local hospitals in Columbus and Canton.
- 2** The Commission recommends analysis of the impact on other facilities of adding services in Columbus, particularly on Chillicothe.

Secretary's Decision

II Access to Hospital Care and Inpatient Medicine Services

The Columbus area is among the fastest growing in the Nation and VA currently forecasts the need for enhanced capacity and access to inpatient care. To meet these needs, VA will use existing authorities and policies to contract for care in Columbus and Canton. As VA plans to contract for inpatient care, it will analyze the impact of contracting on the mission of the Chillicothe VAMC (*Reference – Contracting for Care: Crosscutting*).

CARES Commission Recommendation**III Replacement Outpatient Specialty Care Clinic**

- 1 The Commission concurs with building an expanded 260,000 square foot replacement outpatient specialty care center in Columbus, OH, on Federal land donated by the DoD Defense Supply Center.
- 2 The Commission recommends that the new Columbus outpatient specialty care center be a high priority.

Secretary's Decision**III Replacement Outpatient Specialty Care Clinic**

VA will expand care for Columbus area veterans through construction of a comprehensive multi-specialty outpatient clinic on Federal land donated by the DoD Defense Supply Center. This new multi-specialty clinic will meet a clear need to expand multi-specialty outpatient services in Columbus. The VA clinic that currently serves Columbus veterans was designed to support 135,000 annual outpatient visits. This year it will accommodate more than 205,000. Further, due to space constraints and the limited scope of care currently provided, many veterans are forced to travel significant distances to neighboring VA medical facilities to receive basic care. Development of a new multi-specialty outpatient clinic will largely alleviate that burden by enhancing services and improving access for Columbus area veterans.

The VISN will submit a plan for the development of the multi-specialty clinic by September 2004.

CARES Commission Recommendation**IV Outpatient Primary and Mental Health Care**

The Commission recommends that the Secretary and USH utilize their authority to establish new CBOCs within the VHA medical appropriations without regard to the three priority groups for CBOCs outlined in the DNCP.

Secretary's Decision

IV Outpatient Primary and Mental Health Care

All of the markets in VISN 10 anticipate growth in primary care workload. To meet those anticipated gaps, VA will expand capacity at existing sites through new construction and use of existing authorities and policies to provide contract care where necessary. The VISN also will develop new CBOCs through the National CBOC Approval Process (*Reference – Contracting for Care, Community-Based Outpatient Clinics: Crosscutting*).

CARES Commission Recommendation

V Special Disability Program – Spinal Cord Injury and Disorders (SCI/D) Center

- 1** The Commission concurs with the DNCP proposal to add 20 long-term care beds to the Cleveland SCI/D Center.
- 2** The Commission recommends that VA should conduct an assessment of acute and long-term bed needs for SCI/D Centers to provide the proper balance of beds to better serve veterans and reduce wait times.

Secretary's Decision

V Special Disability Program – Spinal Cord Injury and Disorders (SCI/D) Center

As part of the implementation process, VA will validate the number of SCI/D beds to ensure the appropriate need for and distribution between acute and long-term beds. Validation also will consider referral patterns as well as location and inter-VISN collaboration as appropriate. Implementation plans for development of an expanded SCI/D presence in Cleveland will be included in the FY 2005 VISN strategic planning submission (*Reference – Special Disability Programs: Crosscutting*).

CARES Commission Recommendation

VI Enhanced Use

- 1** The Commission concurs with the DNCP proposal relating to enhanced use lease projects at Cincinnati to lease quarters and use the proceeds for additional parking.
- 2** The Commission concurs with the DNCP proposal relating to enhanced use lease of Dayton's empty buildings.

Secretary's Decision

VI Enhanced Use

VA will pursue existing proposals for enhanced use projects at the Cincinnati and Dayton VAMCs (*Reference – Excess VA Property: Crosscutting*).